



TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/623,136	
	Filing Date	July 17, 2003	
	First Named Inventor	Cyr, Gilles	
	Group Art Unit	1734	
	Examiner Name	Gray, Linda Lamey	
Total Number of Pages in this Submission	26	Attorney Docket No.	CDM/3353.0022

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee transmittal form <input type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing Related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of Cd(s) _____ Remarks:	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosures (identify below) Marked-up copy of Declaration; Return acknowledgment postcard

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual Name	Charles D. McClung
Signature	
Date	February 10, 2005

CERTIFICATE OF TRANSMISSION/ MAILING			
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